

Form CPF D 102: Campaign Finance Report Office of Campaign and Political Finance

File with: Director Office of Campaign and Political Finance One Ashburton Place Boston, MA 02108 (617) 727-8352	NEWTON. MASS Ending: 12/31/2012 ASS Ending: 12/31/2012 ASS
Reporting Period - Beginning: 5/10/2012	Ending: 12/31/2012 SS 23
Type of report: Year-end	30
Charles N. Shapiro	Shapiro Committee
Full Name of Candidate	Committee Name
Governor's Council, 3rd District	Andrew Zaff
Office Sought/ District	Name of Committee Treasurer
67 Walnut Hill Rd.	27 Cottage St.
Newton, MA 02459	Newton, MA 02464
Residential Address	Committee Address
Total receipts this period: Subtotal: Total expenditures this period: Ending Balance: Total inkind contributions this p Total outstanding liabilities: Name of bank(s) used:	\$8,947.93 \$9,313.76 \$6,827.40 \$2,486.36 Period: \$0.00 \$13,880.08
Affidavit of Committee Treasurer: I certify that I have examined this report, including attached a belief, a true and complete statement of all campaign finance ac expenditures, disbursements, inkind contributions and liabilitie finance activity of all persons acting under the authority or or requirements of M.G.L. c. 55. Signed under the penalties of perjury: Treasurer's signature (in ink)	tivity including all contributions, loans, receipts,
Affidavit of Candidate (check 1 box only): Candidate with Committee and no activity independent I certify that I have examined this report, and attached schedul true and complete statement of all campaign finance activity, of	of the committee es and it is, to the best of my knowledge and belief, a

this committee in accordance with the requirements of M.G.L. c. 55, I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR candidate with independent activity filing separate report. I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the

Signed under the penalties of perjury:

requirements of M.G.L. c. 55.

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
6/1/2012	Shapiro (Loan), Charles N. 67 Walnut Hill Rd. Newton, MA 02459	\$4,680.08	President Massmedia, Inc.
	zed Receipts mized Receipts pts	\$4,680.08 \$4,267.85 \$8,947.93	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
9/6/2012	Biltmore 1205 Chestnut St. Newton, MA 02464	\$82.23	Food For Volunteers
6/1/2012	Boyds Direct 100b Maple St. Stoneham, MA 02180	\$1,005.63	Printing
7/30/2012	Massmedia, Inc. 67 Walnut Hill Rd. Newton, MA 02459	\$587.26	Online Advertising
9/7/2012	Massmedia, Inc. 67 Walnut Hill Rd. Newton, MA 02459	\$2,696.57	Online Advertising
6/12/2012	Staples 163 Highland Ave Needham, MA 02494	\$292.18	Supplies
6/1/2012	Staples 163 Highland Ave Needham, MA 02494	\$16.21	Supplies
	zed Expenditures mized Expenditures ditures	\$4,680.08 \$2,147.32 \$6,827.40	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Unit	ized Inkind Contributions emized Inkind Contributions nd Contributions	\$0.00 \$0.00 \$0.00	

Schedule S: Savings

Bank Name	Amount
Total Savings Account Balances:	\$0.00